

SMYRNA POOL: _____new membership application _____renewal application

NAME: _____

ADDRESS _____

PHONES _____
Daytime Emergency

HOUSEHOLD MEMBERS: _____

If not a member of Smyrna Presbyterian Church, please indicate which Smyrna member is your sponsor:

ENCLOSE: a check. Made payable to the Smyrna Presbyterian Church:
_____ \$100 for households belonging to the Smyrna Presbyterian Church
_____ \$250 for other households

MAIL TO: Perry Livsey, 2395 Smyrna Rd., SW; Conyers, Ga. 30094

I understand that the Smyrna pool is not a public pool; it belongs to and is a part of the ministry of the *Smyrna Presbyterian Church*. I will abide by the pool rules.

SIGNATURE _____
Applicant Date

W A I V E R

1. _____, residing at _____

_____, Desire to participate in the Pool Activities sponsored by the Smyrna Presbyterian Church.

For and in consideration of my acceptance and participation in the aforesaid event, sponsored by the Smyrna Presbyterian Church, I waive any and all claims for myself and my heirs, against Smyrna Presbyterian Church, it's agents and employees, for any injury or illness which may directly or indirectly result from my participation in the aforesaid event.

I hereby assume the risk of any injuries that I may sustain in the pursuit of the activities associated with the said event and do hereby remise, release, and forever discharge Smyrna Presbyterian Church, it's employees, agents and volunteers from any actions, suits, damages, and claims or judgments that may result from any personal injury I may sustain while participating in said event, or going to or coming from said event.

I CERTIFY THAT I HAVE READ AND UNDERSTAND THE FOREGOING WAIVER.

SIGNATURE _____ DATE _____